Secretary of State Office 500 E Capitol Ave Pierre, SD 57501 (605)773-2797

APPLICATION FOR CERTIFICATE OF AUTHORIZATION TO PROVIDE POSTSECONDARY EDUCATION

ease mark the appr					
INITIAL	APPLICATION	☐ CHANGE OF PR	NIMARY ADDRESS		
☐ CHANG	E OF NAM E	☐ CHANGE IN ADI	☐ CHANGE IN ADDITIONAL SITES (ATTACHMENT A)		
☐ CHANG	E IN ACCREDITATION	☐ OTHER CHANG	E(S)		
Name of Applicat		er which postsecondary edu	cational programs are provided);		
	n d d / d - dtal		•		
Applicant's Main 604 N. W	Address (<i>Additional sites list</i> 'est Ave	ed on Auschment A).			
604 N. W (Street Address)	est Ave.		57104		
604 N. W (Street Address) Sioux Fa	est Ave.	SD	57104		
604 N. W (Street Address) Sioux Fa	est Ave		57104 (ZIP Code)		
(City) stewartscho	est Ave	SD			
604 N. W (Street Address) Sioux Fa	est Ave	SD			
(City) stewartscho	est Ave	SD (State)			
(City) stewartscho	lls	SD (State)	President/Owner		
(City) stewartscho	est Ave. Ils ool.edu Matthew Fieg	SD (State)	(ZIP Code) President/Owner		
(City) stewartscho	lls ool.edu Matthew Fieg	SD (State)	President/Owner		
(City) stewartscho	est Ave. Ils ool.edu Matthew Fieg (Name) 5635906370	SD (State)	President/Owner (Title) 6053570288		

If "YES", please be advised that Attachment A to this Application must be completed, which shall comprise part of this Application, and any subsequent changes to the information provided in Attachment A must be submitted with a revised Application to the Secretary of State Office, within thirty (30) days of such change.

5.	Does the Applicant have a p	arent organization (non-profit, con	porate, or otherwise)?	■ YES □ NO			
	If "YES", please indicate the following: M & M Fiegen LLC						
	(Parent Organization Na						
	604 N. West Ave.						
	(Street Address) Sioux Falls		SD	57104			
	(City)		(State)	(ZIP Code)			
6.		ntality of the State under the jurisc	diction of the South Dake	ota Board of Regents?			
	☐ YES ■ NO						
	If "NO", please	indicate whether the Applicant is a	either (<i>check one of the</i> i	following):			
	Legally established to operate in South Dakota as a private business entity; or						
	South (Dakota Corporate ID DL00129					
	South (Dakota Corporate Name IVI & I	M Fiegen LLC	_			
	Legally established to operate in South Dakota as a not-for-profit corporation.						
	South I	Dakota Corporate ID					
	South I	Dakota Corporate Name		_			
7.	Is the Applicant accredited by an accrediting agency recognized by the United States Department of Education?						
	Accrediting Agency: Accrediting Commission of Career Schools and Colleges 2101 Wilson Blvd., Suite 302						
	(Street Address	s)					
	Arlington		VA	22201			
	(City)		(State) Feb 2009	(ZIP Code)			
	Effective date of most recent grant of accr		on; <u></u>				
Term or expiration date		tion date of most recent accreditat	Feb 2014	m w .			
	□ NO Applica	ation submission must include doc	rumontation of an affillati	ion adreement whose terms			
	make a by the	ation submission must include doc another postsecondary institution, United States Department of Educ ional credentials to its students ar	which is accredited by a cation, responsible for a	in accrediting agency recognized warding academic credit and			

The undersigned acknowledges that Applicant is required to notify the Secretary of State Office within thirty (30) days of a change in information set forth in this Application, including any changes in information set forth in any Attachments or other accompanying information. The undersigned has executed the foregoing document and, under penalties of perjury, certifies that the information provided herein, and in support thereof, is true and correct.

The application must be signed by an authorized officer of the postsecondary educational institution:

Dated 1/23/13

(Signature of an authorized officer)

Matthew Fregen
(Printed name)

President/Owner

Submit Application to:

South Dakota Secretary of State Corporations Division 500 East Capitol, Suite 204 Pierre, SD 57501

or Save and Submit By Email to sos.edu@state.sd.us

Exemptions

If the institution falls under one or more of the following categories, the institution is exempt from registering.

- Established by the government of the United States;
- Established by the government of an Indian tribe whose tribal lands are located, in whole or in part, in South Dakota;
- Established, owned, controlled, operated, and maintained by a religious organization lawfully operating as a nonprofit religious corporation and awarding only religious degrees or certificates for the purpose of conferring clarical status or authority within that religion; or
- Subject to the jurisdiction and regulations to the South Dakota Cosmetology Commission.

<u>ATTACHMENT A</u>



ADDITIONAL SITES AT WHICH APPLICANT OPERATES EDUCATIONAL PROGRAMS

(Must be accompanied by an Application for Certificate of Authorization to Provide Postsecondary Education)

(Name)		
(Street Address)		
(City)	(State)	(ZIP Code)
(Name)		
(Street Address)	·	
(City)	(State)	(ZIP Code)
·	·	(2 3545)
(Name)		
(Street Address)		
(City)	(State)	(ZIP Code)
(Name)	,	
(Street Address)		-
(City)	(State)	(ZIP Code)

(Make additional copies of this Attachment as may be necessary and submit with Application)